Emergency Department Case Reporting & Crisis Outreach: Public Health Practice Complements Mental Health Practice

Lisa Millet, MSH
Injury & Violence Prevention Program
Public Health Division
Department of Human Services
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ORS 441.750 - Adolescent Suicide Attempt Report

1. Name of patient, Last: _______ First: ___________________ MI: _______
2. Name of Hospital: ___________ County: ______________________________
3. Date of Incident (Month/Day/Year): _____/_____/_____
4. Admitted as Inpatient? □ Yes  □ No  □ Transferred to another hospital (Specify): _
5. Patient or Hospital Chart Number: ______________________________
6. Date of Birth (Month/Day/Year): __/__/__  7. Sex: □ Male  □ Female
8. Race: □ White  □ Black  □ Am. Indian  □ Other (Specify): _______
9. Hispanic: □ Yes  □ No
10. Residence City: _______________ County: __________________________
11. Patient lives with: □ Both Parents  □ Parent and Stepparent  □ Father only
    □ Mother only  □ Foster Parents
    □ Juvenile Facility  □ Friends  □ Homeless  □ Unknown  □ Other
    (Specify):_________
12. Type of self-harm behavior (check only one):

- □ Verbalizes thoughts of self-harm with a specific plan
- □ Verbalizes thoughts of self-harm without a specific plan
- □ Acts on self-harm thoughts, but act does not result in poisoning or injury
- □ Acts on self-harm thoughts, and act results in poisoning or injury

13. Was the act completed?  □ Yes  □ No  □ Unknown

If the answer is no, was the act:

- □ Stopped by the patient
- □ Stopped by someone else
- □ Unknown

14. Did the patient have any intent to die? □ Yes  □ No  □ Unknown

If the answer is yes, did the patient explicitly state that he/she intended to die? □ Yes  □ No  □ Unknown
Public health surveillance

• Infectious disease model

• Injury surveillance

• Application in emergency departments?
  – Response through Community Mental Health
Barriers

• Primary care – emergency care – mental health fragmentation
• HIPAA
• Turf, training, tradition
Crisis episode

• Present at ED
• Case report to public health
• Trigger response by community mental health
  – Response worker to hospital
  – Assess and refer to appropriate community care
Case Reports in S. Oregon – average 16 per month

Nature of Crises:
Harm to others, or thought/threat of harm to others: 24
Harm to self, or thought/threat of harm to self: 45
Suicidal ideation, threat or gesture: 95
Serious suicide attempt: 14
Substance abuse, intoxication: 5
Misc - emotional distress, not eating, etc. 3
Crisis seen at hospital:
Placement in acute psychiatric unit: 12
Held at RVMC Peds for observation: 5
Placement in Juv. Det. Hall shelter: 3
Home w/safety plan and follow-up w/ JCMH: 21
Home w/safety plan and follow-up w/ Private Provider: 6
Crisis Respite at S.O. Adolescent Study & Treatment Center: 5
64% have engaged in, or continued treatment at Jackson County Mental Heath